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PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0033  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
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## UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

### APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- |   |   |
|---|---|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br/><i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.<br/>See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 1-324]<br/><i>(preferred arrangement set forth below)</i><br/>           - Descriptive title of the Invention<br/>           - Cross Reference to Related Applications<br/>           - Statement Regarding Fed sponsored R &amp; D<br/>           - Reference to sequence listing, a table, or a computer program listing appendix<br/>           - Background of the Invention<br/>           - Brief Summary of the Invention<br/>           - Brief Description of the Drawings (<i>if filed</i>)<br/>           - Detailed Description<br/>           - Claim(s)<br/>           - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) (Figs 1-14, 15A-15D)<br/>[Total Sheets 18]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration (unexecuted) [Total Pages 2]           <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br/><i>(for continuation/divisional with Box 17 completed)</i></li> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li> </ul> </p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76.</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>8. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br/><i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Computer Readable Form (CRF)</li> <li>b. <input checked="" type="checkbox"/> Specification Sequence Listing on:               <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input checked="" type="checkbox"/> paper</li> </ul> </li> <li>c. <input type="checkbox"/> Statements verifying identity of above copies</li> </ul> </p> |
|---|---|

### ACCOMPANYING APPLICATION PARTS

9.  Assignment Papers (cover sheet and document(s))
10.  37 CFR 3.73(b) Statement  Power of Attorney
11.  English Translation Document (*if applicable*)
12.  Information Disclosure Statement/ Form PTO/SB/08  
 Copies of Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
*(should be specifically itemized)*
15.  Certified copy of Priority Document(s)  
*(if foreign priority is claimed)*
16.  Other:

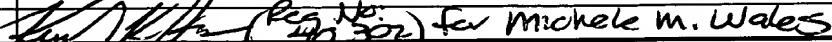
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation     Divisional     Continuation-in-Part (CIP)  
Prior application information: Examiner \_\_\_\_\_ of prior application No: \_\_\_\_\_ / \_\_\_\_\_  
Group/Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

### 18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 22195 or  Correspondence address below

NAME			
ADDRESS			
CITY	STATE	ZIP CODE	
COUNTRY	TELEPHONE	FAX	
NAME (Print/Type)	Registration No. (Attorney/Agent) 43,975		
SIGNATURE	 <small>Reg. No. 43,975 for Michele M. Wales</small>		

Statement: this form is estimated to take 0.2 hours to complete. This will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Total amount of payment

\$4,390.00

## Complete if Known

Application Number	To be assigned
Filing Date	April 12, 2001
First Named Inventor	ROSEN et al.
Examiner Name	To be assigned
Group Art Unit	To be assigned

Attorney Docket Number PF545

## METHOD OF PAYMENT

- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **08-3425**Deposit Account Name **Human Genome Sciences, Inc.**

- Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17
- Applicant claims small entity status.  
See 37 CFR 1.27

2.  Payment Enclosed: Check     Credit Card     Money Order     Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	710	201	355	Utility filing fee	710.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) **\$710.00**

## 2. EXTRA CLAIM FEES

Total Claims Independent Claims	Extra Claims		Fee from below	Fee Paid
	205	-20*		
	4	-3*		
Multiple Dependent			\$270.00	\$270

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
108	80	209	40	" Reissue independent claims over original patent	
110	18	210	9	" Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) **\$3,680.00**

\* or number previously paid, if greater; For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2,520	For filing a request for ex parte reexamination	
112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1,390	Extension for reply within fourth month	
128	1,890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive -unavoidable	
141	1,240	Petition to revive - unintentional	
142	1,240	Utility issue fee (or reissue)	
143	440	Design issue fee	
144	600	Plant issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	180	Submission of Information Disclosure Statement	
581	40	Recording each patent assignment per property (times number of properties)	
146	710	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	Request for Continued Examination (RCE)	
169	900	Request for expedited examination of a design application	
Other fee (specify):			
Other fee (specify):			
Other fee (specify):			
* Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) <b>\$0.00</b>			

## Submitted By

Complete (if applicable)

Name (print/type) Michele M. Wales

Registration No.: 43,975

Telephone 301-610-5772

Signature: *[Signature]* (Res No: 80302) for Michele M. Wales

Date April 12, 2001

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